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## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER:

Total Fee Calculation										
	Fee Code	Total # Claims	Number Extra	<u>x</u>	Fee	Fee	=	Total		
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Office of Initial Patent Examination

Figurë 7

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								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective November 10, 1998							RD	1	09	3	909	110	
CLAIMS AS FILED - PART I (Column 1) (Column 2)									L ENTITY		OTHER		
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* 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								30=	<u> </u>	OR	+260=	
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADDIT. FEE													
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													